

215037951
60694

State of Nebraska
Investigator's Motor Vehicle Accident Report

Sheet 1 of 2

2	Total Number of Vehicles	Local No./ District 499	Agency Case No. B5-086293	HIT & RUN? <input type="radio"/> YES <input checked="" type="radio"/> NO	INVESTIGATION MADE AT SCENE? <input checked="" type="radio"/> YES <input type="radio"/> NO	L 1							
A/1	DATE OF ACCIDENT	M M / D D / Y Y Y Y 09/17/2015		S M T W TH F S <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		TIME OF ACCIDENT 1327							
A/2	PLACE OF ACCIDENT	COUNTY Lancaster	CITY Lincoln	POLICE NOTIFIED 1327	PRIVATE PROPERTY? <input type="radio"/> YES <input checked="" type="radio"/> NO	STATE USE ONLY							
B	85	ROAD ON WHICH ACCIDENT OCCURRED			STREET/ HIGHWAY NO. S. 24th St. at South St.	ONE-WAY STREET? <input type="radio"/> YES <input checked="" type="radio"/> NO							
C	1	DISTANCE FROM MILEPOST	FEET	N S E W	OF MILEPOST	HIGHWAY NO.							
D	2	IF AT INTERSECTION		IF NOT AT INTERSECTION									
V1/M	01	NAME OF INTERSECTING ROADWAY					OF NEAREST STREET, BRIDGE, RAILROAD CROSSING						
V2/M	02	S. 24th St. at South St.											
E	2	IF ACCIDENT WAS OUTSIDE CITY LIMITS, INDICATE DISTANCE FROM NEAREST TOWN											
F	1	DRIVER LICENSE NO.	H12509632	STATE (Of License)	NE	SEX <input checked="" type="radio"/> FEMALE <input type="radio"/> MALE							
V1/N	1	DRIVER	Amber D Block	PHONE	4024990453	LOCAL NO.							
V2/N	5	DRIVER ADDRESS	4421 Meredith, Lincoln, NE 68506	CITY, STATE, ZIP	DATE OF BIRTH (MM / DD / YYYY)	12/04/1982							
G	4	OWNER	AMBER BLOCK	PHONE	4024990453	LOCAL NO.							
H	5	OWNER ADDRESS	4421 Meredith, Lincoln, NE 68506	CITY, STATE, ZIP	CITATION <input type="radio"/> PENDING <input checked="" type="radio"/> YES <input type="radio"/> NO	CITATION NO.							
V1/O	3	LICENSE PLATE PA NO.	SSR875	YEAR (Plate Expires)	2016	STATE (Of Plate) NE							
V2/O	4	VEHICLE	2003 Buick CXL	BODY STYLE	Medium/large	COLOR silver / chrome							
I	1	VEHICLE ID NO. (VIN)	3G5DA03E63S550877	ESTIMATED DAMAGE	<input type="radio"/> TOALED \$ 5000								
J	01	TOWED TO	Capital Towing	TOWED BY	Capital Towing	POLICY NO. 902051609							
K	02	VEHICLE NO. 2											
V1/P	1	DRIVER LICENSE NO.	H13709869 (ID Only)	STATE (Of License)	NE	SEX <input checked="" type="radio"/> FEMALE <input type="radio"/> MALE							
V2/P	1	DRIVER	Jordan C King	PHONE	None	LOCAL NO.							
V1/Q	1	DRIVER ADDRESS	Transient,	CITY, STATE, ZIP	DATE OF BIRTH (MM / DD / YYYY)	04/05/1997							
V2/Q	1	OWNER	SPIRIT VASKE (10-10-1996)	PHONE	4022029633	LOCAL NO.							
V1/R	01	OWNER ADDRESS	4844 SAINT PAUL AVE, LINCOLN, NE 68504	CITY, STATE, ZIP	CITATION <input type="radio"/> PENDING <input checked="" type="radio"/> YES <input type="radio"/> NO	CITATION NO. LB487529							
V2/R	1	LICENSE PLATE PA NO.	TMA403	YEAR (Plate Expires)	2016	STATE (Of Plate) NE							
V1/S	01	VEHICLE	1999 Mercury SLS	BODY STYLE	4 door Sedan	COLOR green							
V2/S	02	VEHICLE ID NO. (VIN)	1MEFM53S3XG608572	ESTIMATED DAMAGE	<input checked="" type="radio"/> TOALED \$								
V1/T	01	TOWED TO	Capital Towing	TOWED BY	Capital Towing	POLICY NO. G00641509502							
V2/T	02	Complete this section for all injured persons (Complete a continuation report, if more than three were injured)											
VEH. #	1	NAME	Amber D Block	ADDRESS	4421 Meredith, Lincoln, NE 68506	DATE OF BIRTH (MM / DD / YYYY)	12/04/1982	1 Seat Position	2 Eject	3 Body Region	4 Injury Sev.	5 Trans.	SEX M F
VEH. #	2	NAME	Jordan C King	ADDRESS	Transient,	DATE OF BIRTH (MM / DD / YYYY)	04/05/1997	1 Seat Position	2 Eject	3 Body Region	4 Injury Sev.	5 Trans.	SEX M F
VEH. #	3	NAME	No Phone	ADDRESS		DATE OF BIRTH (MM / DD / YYYY)		1 Seat Position	2 Eject	3 Body Region	4 Injury Sev.	5 Trans.	SEX M F
VEH. #	4	NAME		ADDRESS		DATE OF BIRTH (MM / DD / YYYY)		1 Seat Position	2 Eject	3 Body Region	4 Injury Sev.	5 Trans.	SEX M F

THE FOLLOWING INFORMATION IS REQUIRED FOR ALL ACCIDENTS

INDICATE BY DIAGRAM WHAT HAPPENED

AGENCY CASE NO.
B5-086293



Indicate
North
by Arrow



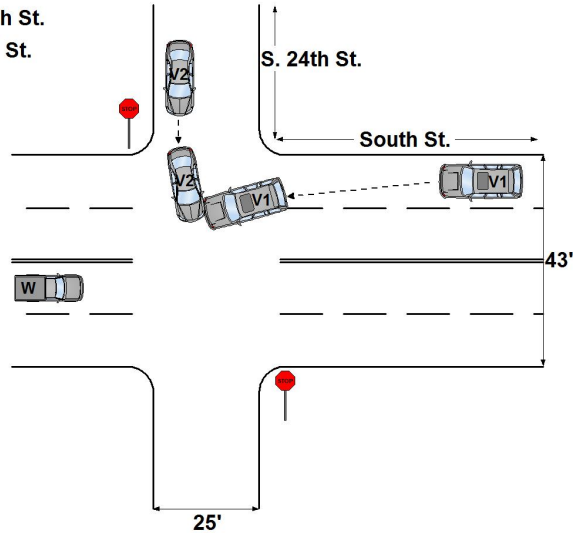
POI

**12' 1" S of N curb South St.
14' E of W curb S. 24th St.**

No Skid Marks

-Stop Sign

-Witness Veh



Not To Scale

'VNM'

DESCRIPTION OF ACCIDENT BASED ON OFFICER'S INVESTIGATION

#1 was W/B, at approx. 35 mph, in the outside lane on South St. at S. 24th St. #1 said that as she was entering the intersection at S. 24th St. she saw veh #2 pull away from the stop sign, out onto South St., right in front of her. #1 stated that she swerved left, and applied her brakes, however was unable to avoid collision with veh #2. #2 was S/B, on S. 24th St., stopped at the stop sign at South St. #2 said that he looked both ways, saw no cross traffic, so he started pulling out onto South St., not seeing veh #1 until it was too late, colliding with veh #1. Witness, Hatwan, was E/B on South St., approaching S. 24th St., when he said that he saw veh #2 pull out in front of veh #1, and saw veh #1 attempt to avoid the collision by swerving to her left. #179

PROPERTY	OBJECT DAMAGED	OWNER NAME	ADDRESS	PHONE	APPROX. COST OF DAMAGE \$
	OBJECT DAMAGED	OWNER NAME	ADDRESS	PHONE	APPROX. COST OF DAMAGE \$
WITNESSES	NAME Patrick J Hatwan	ADDRESS (03-17-1950) 6445 Benton St., Lincoln, NE 68507	PHONE 4023107344		
	NAME	ADDRESS	PHONE		

VEHICLE MOVEMENT BEFORE COLLISION				POINT OF IMPACT AND MOST DAMAGED AREA				AIRBAG DEPLOYED VEHICLE 1				RESTRAINT USE VEHICLE 1				TOTAL OCCUPANTS								
VEH NO.	N	S	E	W	ROAD OR HIGHWAY NAME				(Enter numbers for each vehicle)															
1				X	South St.								4				2				VEH 1 2 VEH 2 2			
2	X				S. 24th St.																Driver No. 1 Driver No. 2 Pedestrian			
1	01				06 Turning left				VEHICLE 1				VEHICLE 2				ALCOHOL TESTING				Y Y Y			
2	01				08 Entering traffic lane				POINT OF IMPACT				POINT OF IMPACT				ALCOHOL LEVEL TESTED				N X N X N			
					09 Leaving traffic lane				MOST DAMAGED AREA				MOST DAMAGED AREA				BAC LEVEL							
					10 Parked				02				08				ALCOHOL/DRUGS SUSPECTED				1 1			
					11 Slowing or stopped in traffic				01				05				1 Neither alcohol nor drugs suspected							
					12 Other				08				06				2 Yes - alcohol suspected							
					13 Unknown				07				06				3 Yes - drugs suspected							
																	4 Yes - alcohol & drugs suspected							
																	5 Unknown							
OFFICER NO. 579					TROOP/TEAM/BEAT 4					DEPARTMENT Lincoln Police Department					Photographs taken? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO									
INVESTIGATOR NAME (Print or Type) Michael Martin					INVESTIGATOR SIGNATURE Approved by Ofc Mike Martin					DATE OF REPORT 09/18/2015														